

**FORM
INSP**Rev
X/20**State of Colorado
Oil and Gas Conservation Commission**1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

Inspection Date:

01/03/2022

Submitted Date:

01/12/2022

Document Number:

688311835**FIELD INSPECTION FORM**Loc ID 311228 Inspector Name: Sherman, Susan On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 10699Name of Operator: OWN RESOURCES OPERATING LLCAddress: 38 PALMER CREST CTCity: SPRING State: TX Zip: 77381**Status Summary:**

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☐ NO FOLLOW UP INSPECTION REQUIRED

Findings:8 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**ANY CORRECTIVE ACTION(S) FROM
PREVIOUS INSPECTIONS THAT HAVE NOT
BEEN ADDRESSED ARE STILL APPLICABLE****Contact Information:**

Contact Name	Phone	Email	Comment
Jones, Greg	970-332-3585	greg.jones@ownresources.com	
Young, Rob		rob.young@state.co.us	
Dolezal, Pat	970-332-3585	pat.dolezal@ownresources.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
300132	WELL	PR	05/14/2010	GW	125-11622	DETERDING 30-16	PR

General Comment:

Routine Field Inspection

LocationOverall Good: ☒

Signs/Marker:			
Type	OTHER		
Comment:	lease sign at gate		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 970-332-3585

Corrective Action:

Date: _____

Overall Good: ☐

Spills:				
Type	Area	Volume		

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Fencing/:			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Equipment:			corrective date
Type: Vertical Separator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Bradenhead	# 1		
Comment:	2021 Form 17 is in COGCC database.		
Corrective Action:		Date:	
Type: Prime Mover	# 1		
Comment:	gas engine		
Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:	digital, 7/7/2021 calibration card is present		
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	
Type: Pump Jack	# 1		

Comment:			
Corrective Action:		Date:	

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Location Construction

Location ID: 300132 CDP: _____

Comment: _____

Corrective Action: _____ Date: _____

Form 2A COAs:**Comment:** No problems seen.

Corrective Action: _____ Date: _____

Wildlife BMPs:**Comment:** _____

Corrective Action: _____ Date: _____

Comment: _____**Corrective Action:** _____ Date: _____**On Site Inspection (305):**Surface Owner Contact Information:

Name: _____ Address: _____

Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____ Phone Number: _____

Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

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Summary of Operator Response to Landowner Issues:

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Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

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Inspected Facilities									
Facility ID:	300132	Type:	WELL	API Number:	125-11622	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	pr 11/1/2021 production reported to COGCC database.								
Corrective Action:								Date:	

Reclamation - Storm Water - Pit**Storm Water:**

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Compaction	Pass	Compaction	Pass			
Gravel	Pass	Gravel	Pass			

Comment: Corrective Action: Date: **Pits:** ☒ NO SURFACE INDICATION OF PIT**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
688311887	OWN Resources Deterding 30-16	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5631474